

Full Name of Payee CDR Communications, Inc.		Date of Public Distribution/Dissemination <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 24 / 2014</div> </div>	
Mailing Address 9310 B Old Keene Mill Rd.		Amount <div> <div></div> <div>5984.18</div> </div>	
City Burke	State VA	Zip Code 22015	Transaction ID : SE.49970 Date of Disbursement or Obligation <div> <div>M M / D D / Y Y Y Y</div> <div>10 / 22 / 2014</div> </div>
Purpose of Expenditure Media buy	Category/ Type	004	
Name of Federal Candidate MARK E UDALL	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: <u>00</u> State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought	<div> <div></div> <div>19458.54</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	11753.18
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Date _____

Signature